BOOK REVIEW

Behavioral Medicine in Primary Care: A Practical Guide. BY MITCHELL D. FELDMAN AND JOHN F. CHRISTENSEN. Stamford, Conn: Appleton and Lange; 1997. 345 pages. \$34.95.

It is not clear if the shift to the primary care setting in the provision of care for mental illness has resulted in medical care of higher quality, greater access, or lesser cost, but it is absolutely clear that it has resulted in an entire library of new textbooks on primary care psychiatry, of which this book, *Behavioral Medicine in Primary Care: A Practical Guide*, is an excellent example. It makes a strong contribution to improving the knowledge and skills of primary care physicians and deserves the particular attention of residents and students.

Other examples of the primary care psychiatry publishing boom include textbooks from the American Medical Association (*Psychiatry for Primary Care Physicians*, American Psychiatric Press, 1998) and the Massachusetts General Hospital (*The MGH Guide to Psychiatry in Primary Care*, McGraw-Hill, 1998). In the spirit of full disclosure, I note that I am a co-editor of another of these textbooks, *Primary Care Psychiatry* (W.B. Saunders, 1997). It might appear that the book under review is a direct competitor with the one with which I am involved, such that I have an irreconcilable conflict of interest. I believe there is not a conflict because of the nature of *Behavioral Medicine in Primary Care*, which leads me to the point of this review.

The purpose of the three textbooks mentioned above is the translation and dissemination of specialty knowledge and skills in psychiatry to the primary care arena. In contrast, *Behavioral Medicine in Primary Care* deals more directly with a wide range of behavioral issues in primary care practice, including a strong emphasis on interviewing, communication and counseling skills, as well as the emotional aspects of medical practice such as sexuality and professionalism and the stresses of medical practice.

Most primary care education in mental illness and psychiatry takes the form of a consulting psychiatrist sharing trade secrets with the front-line primary care physician. Most studies, using widely varying methodologies and diagnostic nomenclature, suggest that more than half of primary care medical practice includes a substantial component of mental illness and behavioral care. Steven Schroeder, President of the Robert Wood Johnson Foundation and author of the foreword to this book challenges

the reader to accept the importance of this work in primary care practice, and overcome the known barriers of poor reimbursement, patient stigmatization, and low professional satisfaction associated with it. This book helps in that process by attempting "to integrate the biological and psychosocial perspectives on human behavior and apply them to the practice of medicine."

The book is organized in five sections: doctor-patient communication and relationships; special populations; health-related behavioral change such as smoking cessation; mental and behavioral disorders such as depression; and special topics such as dealing with mistakes in medical practice. The chapters on caring for difficult patients, sex and professional behavior, managed care, anxiety, dementia, sleep disorders, primary care of HIV patients, and handling medical mistakes are particularly strong. Others, such as those on eating disorders and depression, are weak relative to other readily available reviews. The chapter on the influence of family function and structure on medical and behavioral care is a good example of how crossing primary care boundaries, in this case from family medicine to internal medicine, has value and importance.

The differences among the primary care specialties with regard to mental illness and emotional aspects of practice are highlighted by the value the book will hold for different primary care readers. Family physicians will find much of the book redundant to their residency training, although they will have an intuitive interest in many of the chapters and could use the book as an excellent review and resource. Obstetricians/gynecologists will have either no interest because they have a traditional surgical practice, or a high level of interest if they are focused on primary care women's health. In either case, most will have had a near total lack of such training during their residencies and would benefit from at least a passing understanding of its topics. General internists will find much of the material new, relevant, exciting, and important to their practice because of a high level of interest, considerable prior exposure, at least in some residencies, and obvious relevance to their practice.

All primary care physicians, but more importantly, their residents and students, would benefit from the central message of this book, which is that medical practice occurs in the context of the physician-patient relationship, and only by understanding, managing, and using that relationship in an ethical, supportive, and effective fashion can primary care practice be conducted appropriately. This book advances that cause by providing specific knowledge and skills and, more importantly, the attitudes that will lead to improved communication, enhanced therapeutic relationships, and effective office counseling for the wide range of human misery that takes the form of medical "tickets of admission" to the generalist's daily practice.—**THOMAS L. SCHWENK, MD**, Department of Family Medicine, University of Michigan Medical Center, Ann Arbor, Mich.

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